

Please print or type. (Form designed for use on elite (12-pitch typewriter).)

**UNIFORM HAZARDOUS
WASTE MANIFEST**

1. Generator's US EPA ID No.

Manifest
Document No.

2. Page 1
of

Information in the shaded areas
is not required by Federal law.

3. Generator's Name and Mailing Address

Para Plate
15910 Shoemaker Ave., Cerritos, CA. 90703

4. Generator's Phone (213) 404-3434

5. Transporter 1 Company Name

Omega Recovery Services

6. US EPA ID Number

CAD 042 245 001

7. Transporter 2 Company Name

8. US EPA ID Number

9. Designated Facility Name and Site Address

Omega Recovery Services
12504 E. Whittier Blvd.
Whittier, CA. 90602

10. US EPA ID Number

CAD 042 245 001

A. State Manifest Document Number

88684891

B. State Generator's ID

C. State Transporter's ID

110237

D. Transporter's Phone (213) 698-0991

E. State Transporter's ID

F. Transporter's Phone

G. State Facility's ID

CAD 042 245 001

H. Facility's Phone

(213) 698-0991

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

12. Containers
No. Type

13. Total
Quantity

14. Unit
Wt/Vol

1. Waste No.

a. WASTE ORM-A, N.O.S., NA 1693
(Perchloroethylene, N-Butyl Alcohol)

15 DM

1/50 G

State 211, 212
EPA/Other F001, F003

b.

c.

d.

J. Additional Descriptions for Materials Listed Above

a. - Material to be recycled

K. Handling Codes for Wastes Listed Above

a. 01

c.

15. Special Handling Instructions and Additional Information

Profile#B10016

*Emergency#(213) 404-3434

16.

GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name

Tony Skratulig

Signature

Tony Skratulig

Month Day Year

1/53/19/1

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

CHRIS E. MARTINEZ

Signature

Chris E. Martinez

Month Day Year

1/53/19/1

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Printed/Typed Name

N. JAY SOLOMON

Signature

N. Jay Solomon

Month Day Year

1/53/19/1

88684891
IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550

GENERATOR

TRANSPORTER

FACILITY